

FLWEMS Paramedic Medication Information For:

## **ALBUTEROL**

(Salbutamol, Proventil, Ventolin)

(al-BYOU-ter-ohl)

## **Pregnancy Category**

C Airet Alti-Salbutamol Sulfate Asmavent Dom-Salbutamol Gen-Salbutamol Sterinebs P.F. Med-Salbutamol Novo-Salmol Inhaler PMS-Salbutamol Respirator Solution Proventil Proventil HFA Proventil Repetabs Rho-Salbutamol Salbu-2 and -4 Salbutamol Nebuamp Salmol Ventodisk Disk/Diskhaler Ventolin Ventolin Rotacaps Volmax (Rx)

#### Classification

Direct-acting adrenergic (sympathomimetic) agent

#### See Also

See also Sympathomimetic Drugs.

#### Action/Kinetics

Stimulates beta-2 receptors of the bronchi, leading to bronchodilation. Causes less tachycardia and is longer-acting than isoproterenol. Has minimal beta-1 activity. Available as an inhaler that contains no chlorofluorocarbons (Proventil HFA). Onset, PO: 15-30 min; inhalation, within 5 min. Peak effect, PO: 2-3 hr; inhalation, 60-90 min (after 2 inhalations). Duration, PO: 4-8 hr (up to 12 hr for extended-release); inhalation, 3-6 hr. Metabolites and unchanged drug excreted in urine and feces. Do not use tablets in children less than 12 years of age.

#### Uses

Bronchial asthma; bronchospasm due to bronchitis or emphysema; bronchitis; children 4 years and older for treatment or prevention of bronchospasm with reversible obstructive pulmonary disease; exercise-induced bronchospasm, including those 4 years of age and older. Prophylaxis of bronchial asthma or bronchospasms. Parenteral for treatment of status asthmaticus. Proventil HFA may be used in clients 4 years of age and older. *Investigational*: Nebulized albuterol may be useful as an adjunct to treat serious acute hyperkalemia in hemodialysis clients.

### Contraindications

Aerosol for prevention of exercise-induced bronchospasm is not recommended for children less than 12 years of age. Use during lactation.

## **Special Concerns**

Dosage has not been established for the syrup and solution for inhalation in children less than 2 years of age, for tablets and extended-release tablets in children less than 6 years of age, and the aerosol and inhalation powder in children less than 4 years of age. Albuterol may delay preterm labor. Large IV doses may aggravate preexisting diabetes mellitus and ketoacidosis.

# **Additional Side Effects**

GI: Diarrhea, dry mouth, appetite loss or stimulation, epigastric pain. CNS: Hyperkinesia, excitement, nervousness, tension, tremor, dizziness, vertigo, weakness, drowsiness, restlessness, headache, insomnia, malaise, emotional lability, fatigue, lightheadedness, nightmares, disturbed sleep, aggressive behavior, irritability. Respiratory: Cough, wheezing, dyspnea, bronchospasm, dry throat, pharyngitis, throat irritation, bronchitis, epistaxis, hoarseness (especially in children), nasal congestion, increase in sputum. CV: Palpitations, tachycardia, BP changes, hypertension, tight chest, chest pain or discomfort, angina. Hypersensitivity (may be immediate): Urticaria, angioedema rash, bronchospasm. Miscellaneous: Flushing, sweating, bad or unusual taste, change in smell, muscle cramps, pallor, teeth discoloration, conjunctivitis, dilated pupils, difficulty in urination, muscle spasm, voice changes, oropharyngeal edema.

# **Overdose Management**

*Symptoms:* Seizures, anginal pain, hypertension, hypokalemia, tachycardia (rate may increase to 200 beats/min).

See Sympathomimetic Drugs.

# **Drug Interactions**

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Fir needle oil; Pine needle oil; / TRisk of bronchospasm

# **How Supplied**

Metered dose inhaler: 0.09 mg/inh; Capsule: 200 mcg; Solution: 0.083%, 0.5%; Syrup: 2 mg/5 mL; Tablet: 2 mg, 4 mg; Tablet, Extended Release: 4 mg, 8 mg

#### Dosage

### •Inhalation Aerosol Bronchodilation.

Adults and children over 4 years of age: 180 mcg (2 inhalations) q 4-6 hr. In some clients 1 inhalation (90 mcg) q 4 hr may be sufficient.

Prophylaxis of exercise-induced bronchospasm.

Adults and children over 4 years of age: 180 mcg (2 inhalations) 15 min before exercise.

#### •Inhalation Solution Bronchodilation.

Adults and children over 12 years of age: 2.5 mg t.i.d.-q.i.d. by nebulization (dilute 0.5 mL of the 0.5% solution with 2.5 mL sterile NSS and deliver over 5-15 min). Children, 2-12 years of age, initial: 0.I-0.15 mg/kg/dose; titrate subsequent dosage based on desired clinical response, but not to exceed 2.5 mg t.i.d.-q.i.d. by nebulization.

•Inhalation Capsules Bronchodilation.

Adults and children over 4 years of age: 200 mcg q 4-6 hr using a Rotahaler inhalation device. In some clients, 400 mcg q 4-6 hr may be required.

Prophylaxis of exercise-induced bronchospasm.

Adults and children over 4 years: 200 mcg (1 capsule) 15 min before exercise using a Rotahaler inhalation device.

### •Syrup Bronchodilation.

Adults and children over 14 years of age: 2-4 mg (1-2 teaspoonfuls) t.i.d.-q.i.d., up to a maximum of 8 mg q.i.d. Children, 6-14 years, initial: 2 mg (1 teaspoonful) t.i.d.-q.i.d.; then, increase as necessary to a maximum of 24 mg/day in divided doses. Children, 2-6 years, initial: 0.1 mg/kg t.i.d.; then, increase as necessary up to 0.2 mg/kg, not to exceed 4 mg t.i.d.

### •Tablets Bronchodilation.

Adults and children over 12 years of age, initial: 2-4 mg t.i.d.-q.i.d.; then, increase dose as needed up to a maximum of 8 mg t.i.d.-q.i.d. In geriatric clients or those sensitive to beta agonists, start with 2 mg t.i.d.-q.i.d. and then increase dose gradually, if needed, to a maximum of 8 mg t.i.d.-q.i.d. Children, 6-12 years of age, usual, initial: 2 mg t.i.d.-q.i.d.; then, if necessary, increase the dose in a stepwise fashion to a maximum of 24 mg/day in divided doses.

### •Proventil Repetabs Bronchodilation.

Adults and children over 12 years of age: 4 or 8 mg q 12 hr up to a maximum of 32 mg/day. Children 6-11 years of age, initial: 4 mg q 12 hr. If necessary, increase the dosage stepwise to a maximum of 12 mg b.i.d. Clients on regular-release albuterol can be switched to the Repetabs in that a 4-mg extended-release tablet q 12 hr is equivalent to a regular 2-mg tablet q 6 hr. Multiples of this regimen, up to the maximum recommended dose, also apply.

# •Volmax Extended Release Tablets Bronchodilation.

Adults and children over 12 years of age: 8 mg q 12 hr; in some clients (e.g., low adult body weight), 4 mg q 12 hr may be sufficient initially and then increased to 8 mg q 12 hr, depending on the response. The dose can be increased stepwise and cautiously (under provider supervision) to a maximum of 32 mg/day in divided doses q 12 hr. Children, 6-12 years of age: 4 mg q 12 hr. The dose can be increased stepwise and cautiously (under provider supervision) to a maximum of 24 mg/day in divided doses q 12 hr.

### **END OF INFORMATION - NOTHING FOLLOWS**